



**CITY OF BOSTON**  
**EMPLOYMENT APPLICATION**  
**An Equal Opportunity / Affirmative Action Employer**



In compliance with Federal and State Equal Employment Laws, equal opportunity will be afforded to all applicants regardless of race, color, sex, age, religious creed, disability, national origin, ancestry, sexual orientation, marital status, ex-offender status, prior psychiatric treatment or military status. It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

**Please note that as a condition of employment you must be a resident of the City of Boston on the day of employment and remain a resident for the duration of your employment with the City.**

**PERSONAL DATA**

PLEASE PRINT AND COMPLETE ALL INFORMATION ON BOTH SIDES OF THIS APPLICATION. PLEASE ATTACH A RESUME, IF AVAILABLE.				
<b>Name:</b>	<b>Last</b>	<b>First</b>	<b>Middle Initial</b>	Social Security Number
<b>Date of Application:</b>		Please Circle: <b>Full Time</b> <b>Part Time</b>		<b>Position Title:</b>
Address: Street City State Zip Code				
Home Phone: (Area Code & Number)		Cell Phone: (Area Code & Number)		Work Phone: (Area Code & Number)
Email Address:			How were you referred to the library for employment?	
Have you any relatives working for the City of Boston or County of Suffolk? Yes _____ No _____				
Have you ever worked for the City of Boston or County of Suffolk? Yes _____ No _____				
Are you legally authorized to work in the U.S.? Yes _____ No _____ Veteran of U.S. Armed Forces? Yes _____ No _____				
What was your attendance record at your prior place of employment?				

**EDUCATION**

School	Name & Address of School	Course of Study	Years Completed				Did you Graduate?	Diploma or Degree
High School or Equivalent			1	2	3	4	Yes _____	
							No _____	
College or University			1	2	3	4	Yes _____	
							No _____	
Graduate School			1	2	3	4	Yes _____	
							No _____	
Other			1	2	3	4	Yes _____	
							No _____	
Additional training or skills (languages, computer skills, special licenses, certifications, etc.):								
Professional Affiliations:								
<b>Days Available:</b>	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
<b>Times Available:</b>								

## EMPLOYMENT HISTORY

Please list your most recent position first and account for all periods of time. You may include volunteer, internship or military experience.

Employer's Name	From (Month/Year)	To (Month/Year)	#of Hours / Week	Starting Salary	Final Salary
Street Address			Reason For Leaving		
City, State & Zip Code			Title/ Duties Performed		
Area Code & Phone Number					
May we contact this employer? Yes _____ No _____					
Employer's Name					
From (Month/Year)	To (Month/Year)	#of Hours / Week	Starting Salary	Final Salary	
Street Address			Reason For Leaving		
City, State & Zip Code			Title/ Duties Performed		
Area Code & Phone Number					
May we contact this employer? Yes _____ No _____					
Employer's Name					
From (Month/Year)	To (Month/Year)	#of Hours / Week	Starting Salary	Final Salary	
Street Address			Reason For Leaving		
City, State & Zip Code			Title/ Duties Performed		
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Employer's Name					
From (Month/Year)	To (Month/Year)	#of Hours / Week	Starting Salary	Final Salary	
Street Address			Reason For Leaving		
City, State & Zip Code			Title/ Duties Performed		
Area Code & Phone Number					
May we contact this employer? Yes _____ No _____					
Employer's Name					

For the purpose of facilitating reference information, are your employment or educational records under any other name? If yes, please indicate other name and the date of change:

Former Name:	Date of Change

Any applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to any inquiry herein relative to prior arrest, criminal court appearances or convictions. In addition, any applicant may answer "no record" with respect to any inquiry herein relative to prior arrest, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a criminal conviction.

Have you ever been convicted of a felony?	Yes	No	If yes, please give date and explain.
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The City of Boston's Office of Human Resources has been certified by the Criminal History Systems Board for access to conviction and pending criminal data. As an applicant I understand that a criminal record check may be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me.

Have you been convicted of a misdemeanor within the past 5 years? (Do not include a first conviction for drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace.)      Yes      No      If yes, please give date and explain.

I certify that the information given above is true and complete and I understand that misrepresentation and/or withholding of information on this application or resume will result in the rejection of this application and discharge if discovered after the employment begins.

Applicant's Signature

Date